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## UNITED STATES PATENT AND TRADEMARK OFFICE

 COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/954,994	09/18/2001	Sven K. Esche	SIT-0106

CONFIRMATION NO. 2909

 26259  
 LICATA & TYRRELL P.C.  
 66 E. MAIN STREET  
 MARLTON, NJ 08053

## FORMALITIES LETTER



\*OC000000006976157\*

Date Mailed: 10/26/2001

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

## Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- o The oath or declaration is unsigned.
- o To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.
- o The balance due by applicant is \$ 65.

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- o Substitute drawings in compliance with 37 CFR 1.84 because:
  - o drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. ( 5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

01/31/2002 MWOLDER1 00000033 501613 09954994

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*A copy of this notice **MUST** be returned with the reply.*

  
 Customer Service Center

09954994-012802

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

0954994-012802



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*Sept for \$*

THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: **SIT-0106**  
Inventors: **Esche et al.**  
Serial No.: **09/954,994**  
Filing Date: **September 18, 2001**  
Examiner: **Not Yet Assigned**  
Group Art Unit: **2834**  
Title: **Adaptive Shock and Vibration Attenuation  
Using Adaptive Isolators**

I, **Kathleen A. Tyrrell**, Registration No. **38,350**, certify that this correspondence is being deposited with the U.S. Postal Service as First Class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

On this date: **December 4, 2001**

*Kathleen A. Tyrrell*  
Kathleen A. Tyrrell, Registration No. 38,350

**BOX MISSING PARTS**

Assistant Commissioner for Patents  
Washington, DC 20231

Sir:

**RESPONSE TO NOTICE TO FILE MISSING PARTS OF APPLICATION**

In response to the "Notice to File Missing Parts of Application--Filing Date Granted" dated **October 26, 2001**, a response to which is due **December 26, 2001**, enclosed herewith for filing is the original Combined Declaration and Power of Attorney, executed by the inventor(s). An unexecuted copy of this document, attached to the above-identified specification, was filed by Express Mail No. **EL846059582US** on **September 18, 2001**.

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0954994-012802

(XX) Other: Substitute Drawings in compliance with 37 CFR 1.84.

( ) An Associate Power of Attorney is also enclosed.

(XX) Small entity status of this application has been established on September 18, 2001.

( ) A Verified Statement Claiming Small Entity Status Under 37 CFR 1.9 and 1.27 has been forwarded to the Refund Section, Accounting Division, Office of Finance on \_\_\_\_\_. A **copy** of this Verified Statement Claiming Small Entity Status form and the Request for Refund form is enclosed for your convenience.

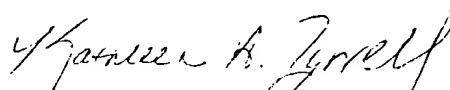
( ) A credit card payment form in the amount of \$\_\_\_\_\_ is attached to cover the surcharge. Please charge any deficiency or credit any overpayment to Deposit Account No. 50-1619.

(XX) Please charge the surcharge to my Deposit Account No. 50-1619 in the amount of \$65.00.

( ) A check in the amount of \$\_\_\_\_\_ is enclosed.

This sheet is attached in duplicate.

Respectfully submitted,



**Kathleen A. Tyrrell**

Registration No. **38,350**

Date: **December 4, 2001**

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